



City of Salisbury  
Development Services  
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Salisbury, NC 28144  
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# SITE PLAN APPLICATION

SHADED AREAS FOR STAFF USE ONLY

FILING DATE: \_\_\_\_\_

REVIEW FEE: \$0.00: MINOR SITE PLAN  
\$250.00: MAJOR SITE PLAN

CASE NUMBER: \_\_\_\_\_

(FORM LAST REVISED 03.13.09)

☐ Minor Site Plan (LDO Sec. 15.8)

☐ Major Site Plan (LDO Sec. 15.9)

☐ Multifamily (less than 8 units)

☐ Multifamily (8 or more units)

☐ Non-Res dev./expand less than 10,000 sf

☐ Non-Res dev./expand 10,000 sf or more

☐ Industrial development

## CONTACT INFORMATION

Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_ email: \_\_\_\_\_

Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_ email: \_\_\_\_\_

Project Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_ email: \_\_\_\_\_

## PROPERTY INFORMATION

Rowan County Parcel ID(s):

Address: \_\_\_\_\_

General Description: \_\_\_\_\_

Zoning District(s):  Zoning Overlay(s):

## SIGNATURE

*I certify that no work has commenced prior to issuance of a permit, that all information provided on this application is accurate, and that all work will be performed to meet the laws of the State of North Carolina, the standards of the Salisbury Land Development Ordinance, and the City of Salisbury Uniform Construction Standards Manual. Submission of this application does not constitute a granting of approval or issuance of a permit. The City of Salisbury reserves the right to request additional information to ensure complete review.*

Applicant: \_\_\_\_\_

## PROJECT INFORMATION

Project Title: \_\_\_\_\_

Present Use: \_\_\_\_\_

Number, type, and condition of any existing structures:

\_\_\_\_\_

List any known nonconformities:

\_\_\_\_\_

Project Type (*check all that apply*): ☐ Residential ☐ Commercial ☐ Industrial ☐ Other \_\_\_\_\_

- For Residential: Total # residential units: \_\_\_\_\_  
Proposed overall density (du/ac.): \_\_\_\_\_
- For Commercial: Total square footage (GFA): \_\_\_\_\_
- For Industrial: Total square footage (GFA): \_\_\_\_\_
- For Other: Total square footage (GFA): \_\_\_\_\_

Proposed Building Type (*check all that apply*):

- |                                     |  |  |                                    |
|-------------------------------------|--|--|------------------------------------|
| <input type="checkbox"/> House      | <input type="checkbox"/> Townhouse     | <input type="checkbox"/> Apartment       | <input type="checkbox"/> Mixed-Use |
| <input type="checkbox"/> Commercial | <input type="checkbox"/> Institutional | <input type="checkbox"/> Public Landmark | <input type="checkbox"/> Other     |

Total Acreage: \_\_\_\_\_ Project Acreage: \_\_\_\_\_

Provide overall project built-upon area (%) for NPDES determination: \_\_\_\_\_

*(applicable for projects over 1 acre or part of a larger common plan of development—Sec. 9.6)*

Does the project require issuance of an NCDOT driveway permit? ☐ Yes ☐ No

Does the overall project generate 3,000+ vpd during an average weekday? (*Sec. 4.14*) ☐ Yes ☐ No

Will the project provide outdoor lighting on private property? (*Ch. 11*) ☐ Yes ☐ No

Will the project require incidental outdoor storage? (*Sec. 6.9*) ☐ Yes ☐ No

Does a sidewalk exist along the streetside parcel lines? (*Sec. 4.4*) ☐ Partial ☐ Yes ☐ No

Requesting Payment In Lieu of Mitigation based on the TIA? (*Sec. 4.14*) ☐ Yes ☐ No

Requesting Payment In Lieu of Recreational Open Space Allocation? (*Sec. 7.6*) ☐ Yes ☐ No

Requesting Payment In Lieu of Sidewalk? (*Sec. 4.9*) ☐ Yes ☐ No

Will the project tie into an existing water or sewer connection? ☐ Water ☐ Sewer ☐ Neither

Is the project requesting a new water or sewer connection? ☐ Water ☐ Sewer ☐ Neither

Brief description of project (*please print clearly*):

\_\_\_\_\_

## PROJECT PLANNING CHECKLIST

Pursuant to LDO Sec. 16.4, all Master Plans that are required for Minor or Major Site Plan applications shall be prepared by a licensed design professional with the appropriate statutory authority. All plans must show or provide the following information where applicable:

### Boundary & Topographic Information:

	DONE	N/A
Vicinity Map (16.4.A)		
Boundary Survey & Limits of Construction (16.4.D & P)		
Original / Proposed contours at max. 2-ft intervals (16.4.F)		
Any portion within Watershed Protection Area (16.4.M)		
Corporate Limits & ETJ boundaries, where applicable (16.4.R)		
Phase Lines (16.4.S)		
Floodplain, Floodway, Jurisdictional Wetlands, and/or streams, where applicable (16.4.T)		

### Site (Master) Plan Information:

	DONE	N/A
Project Title, property owner(s), developer(s), etc. & date of plan(16.4.B, C, & I)		
Site Calculations (acreage, open space, parking, # units, GFA, etc.) (16.4.E)		
Scale, denoted graphically & numerically (16.4.G)		
Any required Certification Statements (16.4.H)		
Zoning District of project area and adjacent properties (16.4.J)		
Location, dimensions & setbacks of all lots & buildings (16.4.L)		
Location of all parking & loading areas with striping and dimensions (16.4.L)		
Location of all existing & planned streets & alleys with dimensions (16.4.L)		
Location of all existing & planned (over & under) utilities and associated easements (16.4.L)		
Location of all recreational open spaces & other site reservations (16.4.L)		
Location of all required NPDES Best Management Practices (BMPs), if required (16.4.N)		
Cross-sections of proposed streets & alleys (16.4.O)		
Location of, including details and screening, solid waste containment		

### Landscape Plan Information:

	DONE	N/A
Location, type & quantity of existing plants/trees and areas to remain natural (16.10.B.6-7)		
Methods & details for protection of Critical Root Zones of existing material (16.10.B.8)		
Location, size & labels of all proposed plants/trees & any other improvements (16.10.B.9,11)		
Planting Table with names, quantity, spacing, size & time of plantings (16.10.B.10)		
Location & details of Irrigation (if applicable) & all planting installation details (16.10.B.12-13)		

**\*\*DEPARTMENTAL USE ONLY\*\***

INITIAL TRC DATE: \_\_\_\_\_ / \_\_\_\_\_ / 20\_\_\_\_

REASON FOR PROVISIONAL APPROVAL OR SUSPENDED REVIEW:

RESUBMITTAL(S) RECEIVED ON: \_\_\_\_\_ / \_\_\_\_\_ / 20\_\_\_\_

RETURNED TO TRC ON: \_\_\_\_\_ / \_\_\_\_\_ / 20\_\_\_\_

APPROVED ☐ DENIED ☐: \_\_\_\_\_ / \_\_\_\_\_ / 20\_\_\_\_

REASON FOR DENIAL: